

SCC eFile	2012 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	212535052					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: Branch Banking and Trust Company</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA 23060-6802</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: NC</p> </div> <div style="width: 35%;"> <p>DUE DATE: 10/31/2012</p> <p>SCC ID NO: F1687203</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMV</td> <td>5,000,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMV	5,000,000	
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<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="margin-left: 40px;">ADDRESS: 200 West 2nd Street</p> <p style="margin-left: 40px;">CITY/ST/ZIP: Winston-Salem, NC 27101-4019</p>							
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>							
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: Robert E. Greene TITLE: PRESIDENT ADDRESS: 200 West 2nd Street CITY/ST/ZIP/CO: Winston-Salem, NC 27101-4019 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: top;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: top;">DIRECTOR</td> </tr> </table>			NAME: Robert E. Greene TITLE: PRESIDENT ADDRESS: 200 West 2nd Street CITY/ST/ZIP/CO: Winston-Salem, NC 27101-4019	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
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<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: Daryl N Bible TITLE: CFO ADDRESS: 200 West 2nd Street CITY/ST/ZIP/CO: Winston-Salem, NC 27101-4019 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: top;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: top;">DIRECTOR</td> </tr> </table>			NAME: Daryl N Bible TITLE: CFO ADDRESS: 200 West 2nd Street CITY/ST/ZIP/CO: Winston-Salem, NC 27101-4019	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
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NAME:	James A Faulkner	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	200 West 2nd Street		
CITY/ST/ZIP/CO:	Winston-Salem, NC 27101-4019		
NAME:	Thomas K. Ferguson	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	200 West 2nd Street		
CITY/ST/ZIP/CO:	Winston-Salem, NC 27101-4019		
NAME:	I. Patricia Henry	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	200 West 2nd Street		
CITY/ST/ZIP/CO:	Winston-Salem, NC 27101-4019		
NAME:	Eric C Kendrick	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	200 West 2nd Street		
CITY/ST/ZIP/CO:	Winston-Salem, NC 27101-4019		
NAME:	Louis B. Lynn	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	200 West 2nd Street		
CITY/ST/ZIP/CO:	Winston-Salem, NC 27101-4019		
NAME:	Edward C. Milligan	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	200 West 2nd Street		
CITY/ST/ZIP/CO:	Winston-Salem, NC 27101-4019		
NAME:	Donald N Patten	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	200 West 2nd Street		
CITY/ST/ZIP/CO:	Winston-Salem, NC 27101-4019		
NAME:	Charles A Patton	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	200 West 2nd Street		
CITY/ST/ZIP/CO:	Winston-Salem, NC 27101-4019		
NAME:	Tollie W Rich Jr.	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	200 West 2nd Street		
CITY/ST/ZIP/CO:	Winston-Salem, NC 27101-4019		
NAME:	David W. Smith Jr.	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	200 West 2nd Street		
CITY/ST/ZIP/CO:	Winston-Salem, NC 27101-4019		
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ Lisa I.Moberly	Lisa I.Moberly,	9/12/2012	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			